

# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

APR 1 6 2013

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le with:							
ity or Town Clerk or Election Commission P	lease print or ty	pe all informatio	n, except sigr	natures.			
Fill in dates:  Reporting Period Beginning 02.	Date 19	2013	Ending _	Month 4	Date 22	2013	
Type of report: (Check one)  ☐8th day preceding preliminary ☑	8th day precedi	ng election 🛚	30 day after e	election	□year-end rep	ort 🗆 dissol	ution
PAULA MOOVE  Full Name of Candidate (if a Selectman - Town of Office Sought and Dis 180 No. ENJ Blvd. Sal  Residential Address 978-499-4466	Salisbur trict lisbury, m	y FR A. 180	PANCINE Name No. ENJ	Committee Mannittee Mannit	hey ttee Treasurer Salisbur iling Address 4444		
Line 1: Ending be Line 2: Total reconstruction Line 3: Subtotal Line 4: Total explaine 5: Ending be Line 6: Total in-key Line 7: Total (all) Line 8: Name of the substance of th	ceipts this p (line 1 plus line penditures balance (line sind contribu	m previous period (page 2 2) this period 3 minus line 4) utions this period gliabilities (	report , line 11) (page 3, line eriod (page	\$ \$ \$ 14) \$ \$  4) \$	2,471. NA 659.10	0 70	
Affidavit of Committee Treasurer: I certify that I have examined this report include finance activity, including all contributions, loss campaign finance activity of all persons acting to the contribution of the contribution o	ns, receipts, expendit under the authority o	ures dishursements.	in-kind contributi nmittee in accord	ons and hav ance with th	filities for righ tebour	ng beann am ich.	campaign esents the
	DIDATE FII	LINGS ONLY	Y: (CANDIDAT	re must :	SIGN BELOW)		
Afficient of Candidate: (check I box only)  Candidate with Committee and no activit I certify that I have examined this report inclu- finance activity, of all persons acting under the contributions, incurred any liabilities nor made Candidate without Committee OR Cand I certify that I have examined this report inclu- finance activity, including contributions, loans campaign finance activity of all persons acting	ty independent of the sing attached schedule authority or on behe any expenditures on ildate with independing attached schedule, receipts, expenditus under the authority of Signed under	he committee les and it is, to the be alf of this committee my behalf during thi lest activity filling so les and it is, to the be-	at of my knowled in accordance wid a reporting period parate report at of my knowled l-kind contribution	ge and belie th the requir lige and belie ns and liabi dance with t	f, a true and comple ements of M.G.L. c. of, a true and comple lities for this reporti	te statement of all ng period and repr A.G.L. c. 55.	campaign
- 1 WU 11/W					Date		

### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		
	Paula moore			LOAN - OWNER OF
2/19/13	180 N. End Blvd. Salisbury, MA.01952	500		TRAVEL ANYWHERE
4/8/13	Paula Moore	2000	_	(for contributions of \$200 or more)  LOAN - OWNER OF  TRAVEL ANYWHERE  LOAN
	Same Address	2000		Ponic
		•		
Line 9:	Total receipts in excess of \$50 (or listed above)	2500	_	
	Total receipts \$50 and under* (not listed above)	/		
	TOTAL RECEIPTS IN THE PERIOD	2,500		Enter on page 1, line 2

<sup>•</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
	· · · · · · · · · · · · · · · · · · ·		-		
					-
		Line 12: Expenditures over \$50			
			13: Expenditures \$50 and under*		
	Enter on page 1, line 4	Line	e 14:TOTAL EXPENDITURES		1

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
***************************************				
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose Purchased	Amount
2/20/13	Your Logo Works	google. Com California	HAND OUT PolitiCAL Flyers	*//2.00
	Vista Print	Lexington, MA. 02421	Purchased it	* 266.37
<del></del>	vista Print	95 Hayden Ave. Lexington, Ma. Oatal	Political Flyers For Mailing	* 280.82
			-	
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	659.19

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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